PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10 65 sour.

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			70					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			7() minus 20= *					X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 = *					X42=		OR	X84=	SV	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=	-	OR	+280=	1	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL		OR.	TOTAL	· -	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY C			OTHER THAN OR SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	·	=		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MI	Minus	***	CLAIM	=	. [X42=		OR	X84=		
,	(-			LIVER	CLAIIVI			+140=		OR	+280=		
						•	TOTAL ADDIT. FEE	×	OR	TOTAL ADDIT. FEE			
	American Control	(Column 1)		(Colur		(Column 3)		1		_		ъ	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 4	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MU	Minus	***	CLAIM	=		X42=		OR	X84=		
ي.	THIOTTILOL	TAMON OF MIC	JETH LE DET	CNDENT	OLANI		۱ [+140=		OR	+280=		
		• •						TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colur		(Column 3)					;	-	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	, ·	
	Independent	*	Minus	***		=	lt	X42=		OR	X84=		
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	ENDEN	CLAIM			+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE													
	The "Highest Num	iber Previously Pa	id For" (Total or	Independ	ent) is the	in 3, enter 3. e highest numbe	r fou	nd in the app	ropriate box	in col	lumn 1.	,	